

POLITICAL INQUIRY FORM WFOR/WBFS - Miami NON- CANDIDATE

Date of Request: 10/3/2016							
1.	AGENCY NAME, ADDRESS & PHONE ORGANIZATION/COMMITTEE NAME,			Hamburger Gibson Creative 5614 Connecticut Ave, NW #219 Washington DC, 20015 888-705-3999		AGENCY CONTACT PERSON: Janet Katowitz	
2. ORGANIZATION ADDRESS & PHO			II IEE NAME,	People United for Medical Marijuana 20 North Orange Ave, Suite 1600 Orlando, FL 32801 850-845-0561		*REQUIRED: List the chief executive officers or members of the executive committee or the board of directors and their titles: Chairperson: John Morgan Treasurer: Benjamin Pollara	
ORGANIZATION FURNISHING TAPES: See Line 1 POLITICAL PARTY (if applicable):							
If the spot communicates a message relating to a political matter of national importance (a legally qualified candidate, election for federal office, or a national legislative issue of public importance), lines 3 and 4 must be completed.							
3.	THE ORGANIZATION LISTED ON LINE 2 HAS PURCHASED TIME TO COMMUNICATE A MESSAGE CONCERNING THE FOLLOWING ISSUE: FL Amendment 2/Medical Marajuana						
4.	4. COMMERCIAL MESSAGE CONTENT: Must detail below:						
Ord	ler#	Advertiser	ISCI Code	Name of Ad	Reference to Candidate for Office? (Y/N)	If YES, Name and Office Sought	What issue does the communication refer to?
5.	NATURE OF REQUEST: Request For NON-CANDIDATE Card Requesting Political Rate Card All Dayparts, All Programs, All Levels Rates: 30s						
6.		TION MADE OF	REQUEST:				
	a) b) c)	Granted Avails Offered Rejected				X X	- - -
7.	SUBSEQ	SUBSEQUENT DEVELOPMENTS/AMOUNT OF CHARGES: SEE FILE					
8.	REBATE	ES: Order #	<u>Date</u>	<u>Amount</u>			
					CBS EMPLOYEE COMPLETING FORM		
					Sean Dorsey, CBS Television Stations, 10/3/16		